

PLATE II

[29 FR 6718, May 22, 1964, as amended at 43 FR 45349, Oct. 2, 1978]

§ 4.71a Schedule of ratings—musculo-skeletal system.**ACUTE, SUBACUTE, OR CHRONIC DISEASES—Continued**

ACUTE, SUBACUTE, OR CHRONIC DISEASES		Rating
5000 Osteomyelitis, acute, subacute, or chronic:		
Of the pelvis, vertebrae, or extending into major joints, or with multiple localization or with long history of intractability and debility, anemia, amyloid liver changes, or other continuous constitutional symptoms	100	
Frequent episodes, with constitutional symptoms	60	
With definite involucrum or sequestrum, with or without discharging sinus	30	
With discharging sinus or other evidence of active infection within the past 5 years	20	
Inactive, following repeated episodes, without evidence of active infection in past 5 years	10	

NOTE (1): A rating of 10 percent, as an exception to the amputation rule, is to be assigned in any case of active osteomyelitis where the amputation rating for the affected part is no percent. This 10 percent rating and the other partial ratings of 30 percent or less are to be combined with ratings for ankylosis, limited motion, nonunion or malunion, shortening, etc., subject, of course, to the amputation rule. The 60 percent rating, as it is based on constitutional symptoms, is not subject to the amputation rule. A rating for osteomyelitis will not be applied following cure by removal or radical resection of the affected bone.

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ACUTE, SUBACUTE, OR CHRONIC DISEASES— Continued

	Rat- ing
NOTE (2): The 20 percent rating on the basis of activity within the past 5 years is not assignable following the initial infection of active osteomyelitis with no subsequent reactivation. The prerequisite for this historical rating is an established recurrent osteomyelitis. To qualify for the 10 percent rating, 2 or more episodes following the initial infection are required. This 20 percent rating or the 10 percent rating, when applicable, will be assigned once only to cover disability at all sites of previously active infection with a future ending date in the case of the 20 percent rating.	
5001 Bones and joints, tuberculosis of, active or inactive:	
Active	100
Inactive: See §§ 4.88b and 4.89.	
5002 Arthritis rheumatoid (atrophic) <i>As an active process:</i>	
With constitutional manifestations associated with active joint involvement, totally incapacitating	100
Less than criteria for 100% but with weight loss and anemia productive of severe impairment of health or severely incapacitating exacerbations occurring 4 or more times a year or a lesser number over prolonged periods	60
Symptom combinations productive of definite impairment of health objectively supported by examination findings or incapacitating exacerbations occurring 3 or more times a year	40
One or two exacerbations a year in a well-established diagnosis	20
For chronic residuals:	
For residuals such as limitation of motion or ankylosis, favorable or unfavorable, rate under the appropriate diagnostic codes for the specific joints involved. Where, however, the limitation of motion of the specific joint or joints involved is noncompensable under the codes a rating of 10 percent is for application for each such major joint or group of minor joints affected by limitation of motion, to be combined, not added under diagnostic code 5002. Limitation of motion must be objectively confirmed by findings such as swelling, muscle spasm, or satisfactory evidence of painful motion.	
NOTE: The ratings for the active process will not be combined with the residual ratings for limitation of motion or ankylosis. Assign the higher evaluation.	
5003 Arthritis, degenerative (hypertrophic or osteoarthritis):	
Degenerative arthritis established by X-ray findings will be rated on the basis of limitation of motion under the appropriate diagnostic codes for the specific joint or joints involved (DC 5200 etc.). When however, the limitation of motion of the specific joint or joints involved is noncompensable under the appropriate diagnostic codes, a rating of 10 pct is for application for each such major joint or group of minor joints affected by limitation of motion, to be combined, not added under diagnostic code 5003. Limitation of motion must be objectively confirmed by findings such as swelling, muscle spasm, or satisfactory evidence of painful motion. In the absence of limitation of motion, rate as below:	

ACUTE, SUBACUTE, OR CHRONIC DISEASES— Continued

	Rat- ing
With X-ray evidence of involvement of 2 or more major joints or 2 or more minor joint groups, with occasional incapacitating exacerbations	20
With X-ray evidence of involvement of 2 or more major joints or 2 or more minor joint groups	10
NOTE (1): The 20 pct and 10 pct ratings based on X-ray findings, above, will not be combined with ratings based on limitation of motion.	
NOTE (2): The 20 pct and 10 pct ratings based on X-ray findings, above, will not be utilized in rating conditions listed under diagnostic codes 5013 to 5024, inclusive.	
5004 Arthritis, gonorrheal.	
5005 Arthritis, pneumococcic.	
5006 Arthritis, typhoid.	
5007 Arthritis, syphilitic.	
5008 Arthritis, streptococcic.	
5009 Arthritis, other types (specify).	
With the types of arthritis, diagnostic codes 5004 through 5009, rate the disability as rheumatoid arthritis.	
5010 Arthritis, due to trauma, substantiated by X-ray findings: Rate as arthritis, degenerative.	
5011 Bones, caisson disease of: Rate as arthritis, cord involvement, or deafness, depending on the severity of disabling manifestations.	
5012 Bones, new growths of, malignant	100
NOTE: The 100 percent rating will be continued for 1 year following the cessation of surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. At this point, if there has been no local recurrence or metastases, the rating will be made on residuals.	
5013 Osteoporosis, with joint manifestations.	
5014 Osteomalacia.	
5015 Bones, new growths of, benign.	
5016 Osteitis deformans.	
5017 Gout.	
5018 Hydrarthrosis, intermittent.	
5019 Bursitis.	
5020 Synovitis.	
5021 Myositis.	
5022 Periostitis.	
5023 Myositis ossificans.	
5024 Tenosynovitis.	
The diseases under diagnostic codes 5013 through 5024 will be rated on limitation of motion of affected parts, as arthritis, degenerative, except gout which will be rated under diagnostic code 5002.	
5025 Fibromyalgia (fibrositis, primary fibromyalgia syndrome)	
With widespread musculoskeletal pain and tender points, with or without associated fatigue, sleep disturbance, stiffness, paresthesias, headache, irritable bowel symptoms, depression, anxiety, or Raynaud's-like symptoms:	
That are constant, or nearly so, and refractory to therapy	40
That are episodic, with exacerbations often precipitated by environmental or emotional stress or by overexertion, but that are present more than one-third of the time	20
That require continuous medication for control	10

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ACUTE, SUBACUTE, OR CHRONIC DISEASES—
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	Rating
NOTE: Widespread pain means pain in both the left and right sides of the body, that is both above and below the waist, and that affects both the axial skeleton (i.e., cervical spine, anterior chest, thoracic spine, or low back) and the extremities.	

PROSTHETIC IMPLANTS

	Rating	
	Major	Minor
5051 Shoulder replacement (prosthesis). Prosthetic replacement of the shoulder joint: For 1 year following implantation of prosthesis With chronic residuals consisting of severe, painful motion or weakness in the affected extremity With intermediate degrees of residual weakness, pain or limitation of motion, rate by analogy to diagnostic codes 5200 and 5203. Minimum rating 5052 Elbow replacement (prosthesis). Prosthetic replacement of the elbow joint: For 1 year following implantation of prosthesis With chronic residuals consisting of severe painful motion or weakness in the affected extremity With intermediate degrees of residual weakness, pain or limitation of motion rate by analogy to diagnostic codes 5205 through 5208. Minimum evaluation 5053 Wrist replacement (prosthesis). Prosthetic replacement of wrist joint: For 1 year following implantation of prosthesis With chronic residuals consisting of severe, painful motion or weakness in the affected extremity With intermediate degrees of residual weakness, pain or limitation of motion, rate by analogy to diagnostic code 5214. Minimum rating NOTE: The 100 pct rating for 1 year following implantation of prosthesis will commence after initial grant of the 1-month total rating assigned under § 4.30 following hospital discharge. 5054 Hip replacement (prosthesis). Prosthetic replacement of the head of the femur or of the acetabulum: For 1 year following implantation of prosthesis	100 60 30 100 50 30 100 40 20 100 40 20 100 20 100 20 100	100 50 20 100 40 20 100 30 20 100 30 20 100 20 100 20 100

PROSTHETIC IMPLANTS—Continued

	Rating	
	Major	Minor
Following implantation of prosthesis with painful motion or weakness such as to require the use of crutches Markedly severe residual weakness, pain or limitation of motion following implantation of prosthesis Moderately severe residuals of weakness, pain or limitation of motion Minimum rating 5055 Knee replacement (prosthesis). Prosthetic replacement of knee joint: For 1 year following implantation of prosthesis With chronic residuals consisting of severe painful motion or weakness in the affected extremity With intermediate degrees of residual weakness, pain or limitation of motion rate by analogy to diagnostic codes 5256, 5261, or 5262. Minimum rating 5056 Ankle replacement (prosthesis). Prosthetic replacement of ankle joint: For 1 year following implantation of prosthesis With chronic residuals consisting of severe painful motion or weakness With intermediate degrees of residual weakness, pain or limitation of motion rate by analogy to 5270 or 5271. Minimum rating NOTE (1): The 100 pct rating for 1 year following implantation of prosthesis will commence after initial grant of the 1-month total rating assigned under § 4.30 following hospital discharge. NOTE (2): Special monthly compensation is assignable during the 100 pct rating period the earliest date permanent use of crutches is established.		190 70 50 30 100 60 30 100 40 20
COMBINATIONS OF DISABILITIES		
5104 Anatomical loss of one hand and loss of use of one foot 5105 Anatomical loss of one foot and loss of use of one hand 5106 Anatomical loss of both hands 5107 Anatomical loss of both feet 5108 Anatomical loss of one hand and one foot 5109 Loss of use of both hands 5110 Loss of use of both feet 5111 Loss of use of one hand and one foot		1100 1100 1100 1100 1100 1100 1100 1100

¹ Also entitled to special monthly compensation.

TABLE II—RATINGS FOR MULTIPLE LOSSES OF EXTREMITIES WITH DICTATOR'S RATING CODE AND 38 CFR CITATION

Impairment of one extremity	Impairment of other extremity				
	Anatomical loss or loss of use below elbow	Anatomical loss or loss of use below knee	Anatomical loss or loss of use above elbow (preventing use of prosthesis)	Anatomical loss or loss of use above knee (preventing use of prosthesis)	Anatomical loss near hip (preventing use of prosthesis)
Anatomical loss or loss of use below elbow.	M Codes M-1 a, b, or c, 38 CFR 3.350 (c)(1)(i).	L Codes L-1 d, e, f, or g, 38 CFR 3.350(b).	M $\frac{1}{2}$ Code M-5, 38 CFR 3.350 (f)(1)(x).	L $\frac{1}{2}$ Code L-2 c, 38 CFR 3.350 (f)(1)(vi).	M Code M-3 c, 38 CFR 3.350 (f)(1)(viii).
Anatomical loss or loss of use below knee.	.....	L Codes L-1 a, b, or c, 38 CFR 3.350(b).	L $\frac{1}{2}$ Code L-2 b, 38 CFR 3.350 (f)(1)(iii).	L $\frac{1}{2}$ Code L-2 a, 38 CFR 3.350 (f)(1)(i).	M Code M-3 a, 38 CFR 3.350 (f)(1)(ii).
Anatomical loss or loss of use above elbow (preventing use of prosthesis).	.....	.....	N Code N-1, 38 CFR 3.350 (d)(1).	M Code M-2 a, 38 CFR 3.350 (c)(1)(iii).	M $\frac{1}{2}$ Code M-4 c, 38 CFR 3.350 (f)(1)(xi).
Anatomical loss or loss of use above knee (preventing use of prosthesis).	.....	.....	.....	M Code M-2 a, 38 CFR 3.350 (c)(1)(ii).	M $\frac{1}{2}$ Code M-4 a, 38 CFR 3.350 (f)(1)(v).
Anatomical loss near shoulder (preventing use of prosthesis).	.....	.....	.....	.....	N Code N-3, 38 CFR 3.350 (f)(1)(xi).
Anatomical loss near hip (preventing use of prosthesis).	.....	.....	.....	O Code O-1, 38 CFR 3.350 (e)(1)(i).	M Code M-3 b, 38 CFR 3.350 (f)(1)(iv).
				.....	N $\frac{1}{2}$ Code N-4, 38 CFR 3.350 (f)(1)(v).
				.....	N $\frac{1}{2}$ Code M-4 c, 38 CFR 3.350 (f)(1)(xi).
				.....	M $\frac{1}{2}$ Code M-4 a, 38 CFR 3.350 (f)(1)(v).
				.....	N Code N-2 b, 38 CFR 3.350 (d)(3).
				.....	N Code N-2 a, 38 CFR 3.350 (d)(2).

NOTE.—Need for aid attendance or permanently bedridden qualifies for subpar. L, Code L-1 h, i (38 CFR 3.350(b)). Paraplegia with loss of use of both lower extremities and loss of anal and bladder sphincter control qualifies for subpar. O, Code O-2 (38 CFR 3.350(e)(2)). Where there are additional disabilities rated 50% or 100%, or anatomical or loss of use of a third extremity see 38 CFR 3.350(f) (3), (4) or (5).

(Authority: 38 U.S.C. 1115)

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AMPUTATIONS: UPPER EXTREMITY

	Rating	
	Major	Minor
Arm, amputation of:		
5120 Disarticulation	190	190
5121 Above insertion of deltoid	190	180
5122 Below insertion of deltoid	180	170
Forearm, amputation of:		
5123 Above insertion of pronator teres	180	170
5124 Below insertion of pronator teres	170	160
5125 Hand, loss of use of	170	160
MULTIPLE FINGER AMPUTATIONS		
5126 Five digits of one hand, amputation of	170	160
Four digits of one hand, amputation of:		
5127 Thumb, index, middle and ring	170	160
5128 Thumb, index, middle and little	170	160
5129 Thumb, index, ring and little	170	160
5130 Thumb, middle, ring and little	170	160
5131 Index, middle, ring and little	60	50
Three digits of one hand, amputation of:		
5132 Thumb, index and middle	60	50
5133 Thumb, index and ring	60	50
5134 Thumb, index and little	60	50
5135 Thumb, middle and ring	60	50
5136 Thumb, middle and little	60	50
5137 Thumb, ring and little	60	50
5138 Index, middle and ring	50	40
5139 Index, middle and little	50	40
5140 Index, ring and little	50	40
5141 Middle, ring and little	40	30
Two digits of one hand, amputation of:		
5142 Thumb and index	50	40
5143 Thumb and middle	50	40
5144 Thumb and ring	50	40
5145 Thumb and little	50	40
5146 Index and middle	40	30
5147 Index and ring	40	30
5148 Index and little	40	30
5149 Middle and ring	30	20
5150 Middle and little	30	20
5151 Ring and little	30	20
(a) The ratings for multiple finger amputations apply to amputations at the proximal interphalangeal joints or through proximal phalanges..		
(b) Amputation through middle phalanges will be rated as prescribed for unfavorable ankylosis of the fingers..		
(c) Amputations at distal joints, or through distal phalanges, other than negligible losses, will be rated as prescribed for favorable ankylosis of the fingers..		

AMPUTATIONS: UPPER EXTREMITY—Continued

	Rating	
	Major	Minor
(d) Amputation or resection of metacarpal bones (more than one-half the bone lost) in multiple fingers injuries will require a rating of 10 percent added to (not combined with) the ratings, multiple finger amputations, subject to the amputation rule applied to the forearm.		
(e) Combinations of finger amputations at various levels, or finger amputations with ankylosis or limitation of motion of the fingers will be rated on the basis of the grade of disability; i.e., amputation, unfavorable ankylosis, most representative of the levels or combinations. With an even number of fingers involved, and adjacent grades of disability, select the higher of the two grades.		
(f) Loss of use of the hand will be held to exist when no effective function remains other than that which would be equally well served by an amputation stump with a suitable prosthetic appliance.		
SINGLE FINGER AMPUTATIONS		
5152 Thumb, amputation of:		
With metacarpal resection	40	30
At metacarpophalangeal joint or through proximal phalanx	30	20
At distal joint or through distal phalanx	20	20
5153 Index finger, amputation of:		
With metacarpal resection (more than one-half the bone lost)	30	20
Without metacarpal resection, at proximal interphalangeal joint or proximal thereto	20	20
Through middle phalanx or at distal joint	10	10
5154 Middle finger, amputation of:		
With metacarpal resection (more than one-half the bone lost)	20	20
Without metacarpal resection, at proximal interphalangeal joint or proximal thereto	10	10
5155 Ring finger, amputation of:		
With metacarpal resection (more than one-half the bone lost)	20	20
Without metacarpal resection, at proximal interphalangeal joint or proximal thereto	10	10
5156 Little finger, amputation of:		
With metacarpal resection (more than one-half the bone lost)	20	20
Without metacarpal resection, at proximal interphalangeal joint or proximal thereto	10	10
NOTE: The single finger amputation ratings are the only applicable ratings for amputations of whole or part of single fingers.		

¹ Entitled to special monthly compensation.

SINGLE FINGER AMPUTATIONS

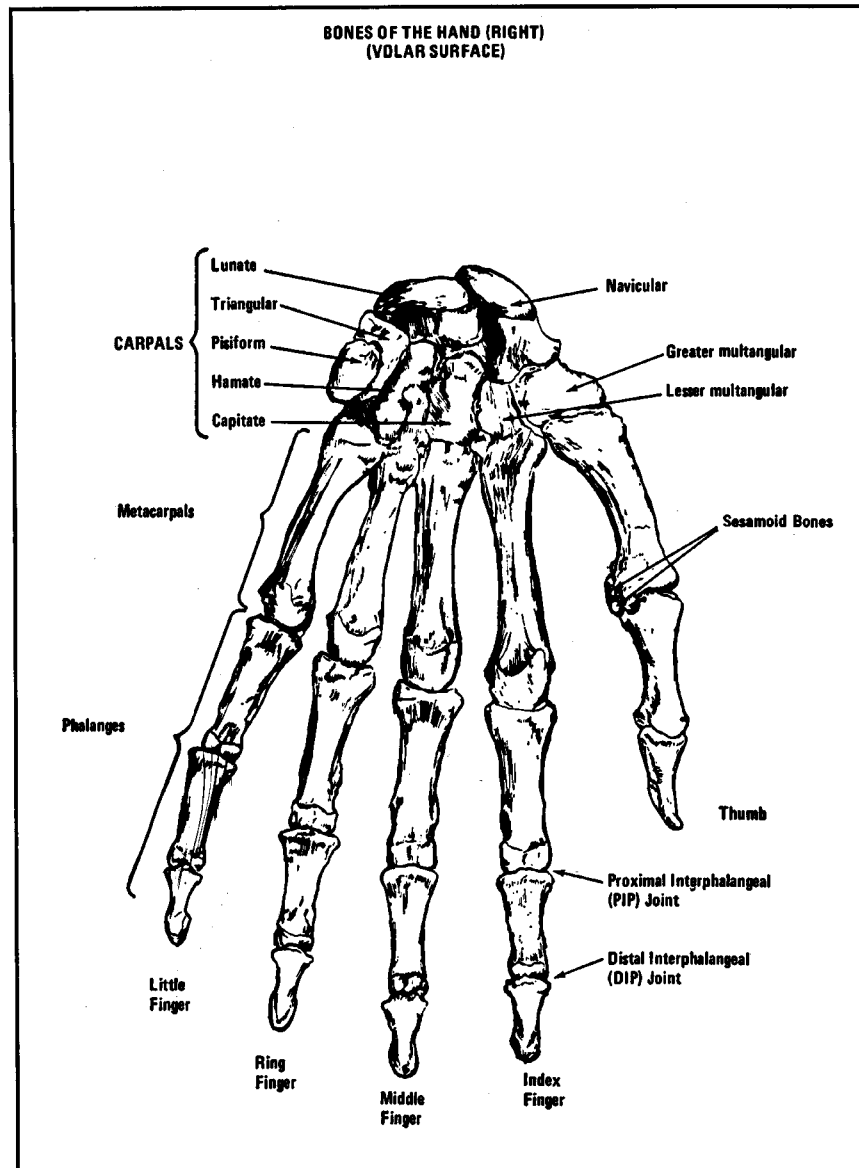


PLATE III

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AMPUTATIONS: LOWER EXTREMITY

	Rating
Thigh, amputation of:	
5160 Disarticulation, with loss of extrinsic pelvic girdle muscles	² 90
5161 Upper third, one-third of the distance from perineum to knee joint measured from perineum ...	² 80
5162 Middle or lower thirds	² 60
Leg, amputation of:	
5163 With defective stump, thigh amputation recommended	² 60
5164 Amputation not improvable by prosthesis controlled by natural knee action	² 60
5165 At a lower level, permitting prosthesis	² 40
5166 Forefoot, amputation proximal to metatarsal bones (more than one-half of metatarsal loss)	² 40
5167 Foot, loss of use of	² 40

AMPUTATIONS: LOWER EXTREMITY—Continued

	Rating
5170 Toes, all, amputation of, without metatarsal loss	30
5171 Toe, great, amputation of:	
With removal of metatarsal head	30
Without metatarsal involvement	10
5172 Toes, other than great, amputation of, with removal of metatarsal head:	
One or two	20
Without metatarsal involvement	0
5173 Toes, three or four, amputation of, without metatarsal involvement:	
Including great toe	20
Not including great toe	10

²Also entitled to special monthly compensation.

AMPUTATIONS: LOWER EXTREMITY

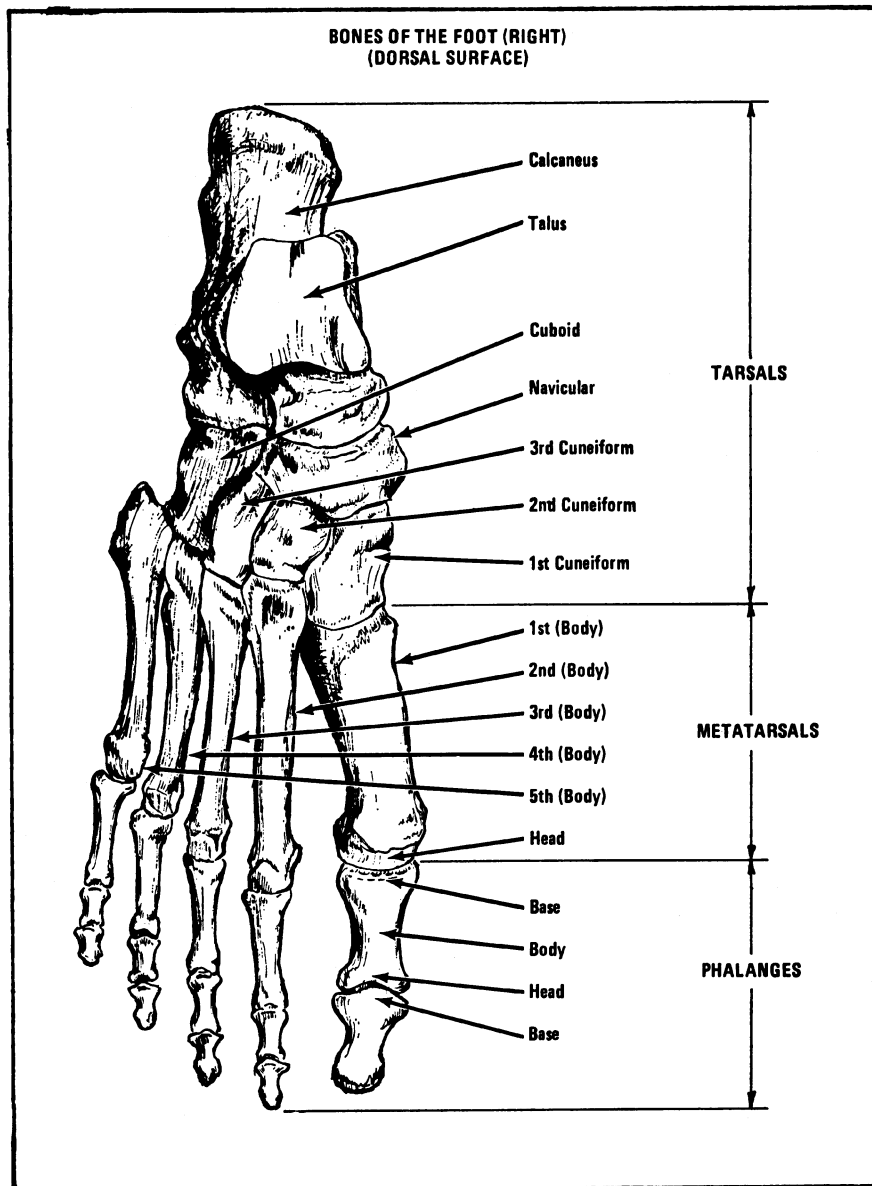


PLATE IV

THE SHOULDER AND ARM

	Rating	
	Major	Minor
5200 Scapulohumeral articulation, ankylosis of:		
NOTE: The scapula and humerus move as one piece.		
Unfavorable, abduction limited to 25° from side	50	40
Intermediate between favorable and unfavorable	40	30
Favorable, abduction to 60°, can reach mouth and head	30	20
5201 Arm, limitation of motion of:		
To 25° from side	40	30
Midway between side and shoulder level	30	20
At shoulder level	20	20
5202 Humerus, other impairment of:		
Loss of head of (flail shoulder)	80	70
Nonunion of (false flail joint)	60	50
Fibrous union of	50	40
Recurrent dislocation of at scapulohumeral joint.		
With frequent episodes and guarding of all arm movements	30	20
With infrequent episodes, and guarding of movement only at shoulder level	20	20
Malunion of:		
Marked deformity	30	20
Moderate deformity	20	20
5203 Clavicle or scapula, impairment of:		
Dislocation of	20	20
Nonunion of:		
With loose movement	20	20
Without loose movement	10	10
Malunion of	10	10
Or rate on impairment of function of contiguous joint.		

THE ELBOW AND FOREARM

	Rating	
	Major	Minor
5205 Elbow, ankylosis of:		
Unfavorable, at an angle of less than 50° or with complete loss of supination or pronation	60	50
Intermediate, at an angle of more than 90°, or between 70° and 50°	50	40
Favorable, at an angle between 90° and 70°	40	30
5206 Forearm, limitation of flexion of:		
Flexion limited to 45°	50	40
Flexion limited to 55°	40	30
Flexion limited to 70°	30	20
Flexion limited to 90°	20	20
Flexion limited to 100°	10	10
Flexion limited to 110°	0	0
5207 Forearm, limitation of extension of:		
Extension limited to 110°	50	40
Extension limited to 100°	40	30
Extension limited to 90°	30	20
Extension limited to 75°	20	20
Extension limited to 60°	10	10
Extension limited to 45°	10	10
5208 Forearm, flexion limited to 100° and extension to 45°	20	20
5209 Elbow, other impairment of Flail joint	60	50

THE ELBOW AND FOREARM—Continued

	Rating	
	Major	Minor
Joint fracture, with marked cubitus varus or cubitus valgus deformity or with ununited fracture of head of radius	20	20
5210 Radius and ulna, nonunion of, with flail false joint	50	40
5211 Ulna, impairment of:		
Nonunion in upper half, with false movement:		
With loss of bone substance (1 inch (2.5 cms.) or more) and marked deformity	40	30
Without loss of bone substance or deformity	30	20
Nonunion in lower half	20	20
Malunion of, with bad alignment	10	10
5212 Radius, impairment of:		
Nonunion in lower half, with false movement:		
With loss of bone substance (1 inch (2.5 cms.) or more) and marked deformity	40	30
Without loss of bone substance or deformity	30	20
Nonunion in upper half	20	20
Malunion of, with bad alignment	10	10
5213 Supination and pronation, impairment of:		
Loss of (bone fusion):		
The hand fixed in supination or hyperpronation	40	30
The hand fixed in full pronation	30	20
The hand fixed near the middle of the arc or moderate pronation	20	20
Limitation of pronation:		
Motion lost beyond middle of arc ...	30	20
Motion lost beyond last quarter of arc, the hand does not approach full pronation	20	20
Limitation of supination:		
To 30° or less	10	10
NOTE: In all the forearm and wrist injuries, codes 5205 through 5213, multiple impaired finger movements due to tendon tie-up, muscle or nerve injury, are to be separately rated and combined not to exceed rating for loss of use of hand.		

THE WRIST

	Rating	
	Major	Minor
5214 Wrist, ankylosis of:		
Unfavorable, in any degree of palmar flexion, or with ulnar or radial deviation	50	40
Any other position, except favorable	40	30
Favorable in 20° to 30° dorsiflexion	30	20
NOTE: Extremely unfavorable ankylosis will be rated as loss of use of hands under diagnostic code 5125.		
5215 Wrist, limitation of motion of:		
Dorsiflexion less than 15°	10	10
Palmar flexion limited in line with forearm	10	10

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MULTIPLE FINGERS: UNFAVORABLE ANKYLOSIS

	Rating	
	Major	Minor
In classifying the severity of ankylosis and limitation of motion of single digits and combinations of digits the following rules will be observed:		
(1) Ankylosis of both the metacarpophalangeal and proximal interphalangeal joints, with either joint in extension or in extreme flexion, will be rated as amputation.		
(2) Ankylosis of both the metacarpophalangeal and proximal interphalangeal joints, even though each is individually in favorable position, will be rated as unfavorable ankylosis.		
(3) With only one joint of a digit ankylosed or limited in its motion, the determination will be made on the basis of whether motion is possible to within 2 inches (5.1 cms.) of the median transverse fold of the palm; when so possible, the rating will be for favorable ankylosis, otherwise unfavorable.		
(4) With the thumb, the carpometacarpal joint is to be regarded as comparable to the metacarpophalangeal joint of other digits.		
5216 Five digits of one hand, unfavorable ankylosis of	60	50
5217 Four digits of one hand, unfavorable ankylosis of:		
Thumb, index, middle and ring	60	50
Thumb, index, middle and little	60	50
Thumb, index, ring and little	60	50
Thumb, middle, ring and little	60	50
Index, middle, ring and little	50	40
5218 Three digits of one hand, unfavorable ankylosis of:		
Thumb, index and middle	50	40
Thumb, index and ring	50	40
Thumb, index and little	50	40
Thumb, middle and ring	50	40
Thumb, middle and little	50	40
Thumb, ring and little	50	40
Index, middle and ring	40	30
Index, middle and little	40	30
Index, ring and little	40	30
Middle, ring and little	30	20
5219 Two digits of one hand, unfavorable ankylosis of:		
Thumb and index	40	30
Thumb and middle	40	30
Thumb and ring	40	30
Thumb and little	40	30
Index and middle	30	20
Index and ring	30	20
Index and little	30	20
Middle and ring	20	20
Middle and little	20	20
Ring and little	20	20

MULTIPLE FINGERS: UNFAVORABLE ANKYLOSIS—Continued

	Rating	
	Major	Minor
(a) Extremely unfavorable ankylosis of the fingers, all joints in extension or in extreme flexion, or with rotation and angulation of bones, will be rated as amputation.		
(b) The ratings for codes 5216 through 5219 apply to unfavorable ankylosis or limited motion preventing flexion of tips to within 2 inches (5.1 cms.) of median transverse fold of the palm.		
(c) Combinations of finger amputations at various levels, or of finger amputations with ankylosis or limitation of motion of the fingers will be rated on the basis of the grade of disability, i.e., amputation, unfavorable ankylosis, or favorable ankylosis, most representative of the levels or combinations. With an even number of fingers involved, and adjacent grades of disability, select the higher of the two grades.		

MULTIPLE FINGERS: FAVORABLE ANKYLOSIS

	Rating	
	Major	Minor
In classifying the severity of ankylosis and limitation of motion of single digits and combinations of digits the following rules will be observed:		
(1) Ankylosis of both the metacarpophalangeal and proximal interphalangeal joints, with either joint in extension or in extreme flexion, will be rated as amputation.		
(2) Ankylosis of both the metacarpophalangeal and proximal interphalangeal joints, even though each is individually in favorable position, will be rated as unfavorable ankylosis.		
(3) With only one joint of a digit ankylosed or limited in its motion, the determination will be made on the basis of whether motion is possible to within 2 inches (5.1 cms.) of the median transverse fold of the palm; when so possible, the rating will be for favorable ankylosis, otherwise unfavorable.		
(4) With the thumb, the carpometacarpal joint is to be regarded as comparable to the metacarpophalangeal joint of other digits.		
5220 Five digits of one hand, favorable ankylosis of	50	40
5221 Four digits of one hand, favorable ankylosis of:		
Thumb, index, middle and ring	50	40
Thumb, index, middle and little	50	40
Thumb, index, ring and little	50	40
Thumb, middle, ring and little	50	40

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MULTIPLE FINGERS: FAVORABLE ANKYLOSIS—
Continued

	Rating	
	Major	Minor
Index, middle, ring and little	40	30
5222 Three digits of one hand, favorable ankylosis of:		
Thumb, index and middle	40	30
Thumb, index and ring	40	30
Thumb, index and little	40	30
Thumb, middle and ring	40	30
Thumb, middle and little	40	30
Thumb, ring and little	40	30
Index, middle and ring	30	20
Index, middle and little	30	20
Index, ring and little	30	20
Middle, ring and little	20	20
5223 Two digits of one hand, favorable ankylosis of:		
Thumb and index	30	20
Thumb and middle	30	20
Thumb and ring	30	20
Thumb and little	30	20
Index and middle	20	20
Index and ring	20	20
Index and little	20	20
Middle and ring	10	10
Middle and little	10	10
Ring and little	10	10
(a) The ratings for codes 5220 through 5223 apply to favorable ankylosis or limited motion permitting flexion of the tips to within 2 inches (5.1 cms.) of the transverse fold of the palm. Limitation of motion of less than 1 inch (2.5 cms.) in either direction is not considered disabling.		
(b) Combination of finger amputations at various levels, or of finger amputations with ankylosis or limitation of motion of the fingers will be rated on the basis of the grade of disability, i.e., amputation, unfavorable ankylosis, or favorable ankylosis, most representative of the levels or combinations. With an even number of fingers involved, and adjacent grades of disability, select the higher of the two grades.		

ANKYLOSIS OF INDIVIDUAL FINGERS

	Rating	
	Major	Minor
5224 Thumb, ankylosis of:		
Unfavorable	20	20
Favorable	10	10
5225 Index finger, ankylosis of:		
Unfavorable	10	10
Favorable	10	10
5226 Middle finger, ankylosis of:		
Unfavorable	10	10
Favorable	10	10
5227 Finger, any other, ankylosis of	0	0
NOTE: Extremely unfavorable ankylosis will be rated as amputation under diagnostic codes 5152 through 5156.		

THE HIP AND THIGH

	Rat- ing
5250 Hip, ankylosis of:	
Unfavorable, extremely unfavorable ankylosis, the foot not reaching ground, crutches necessitated	³ 90
Intermediate	70
Favorable, in flexion at an angle between 20° and 40°, and slight adduction or abduction	60
5251 Thigh, limitation of extension of:	
Extension limited to 5°	10
5252 Thigh, limitation of flexion of:	
Flexion limited to 10°	40
Flexion limited to 20°	30
Flexion limited to 30°	20
Flexion limited to 45°	10
5253 Thigh, impairment of:	
Limitation of abduction of, motion lost beyond 10°	20
Limitation of adduction of, cannot cross legs	10
Limitation of rotation of, cannot toe-out more than 15°, affected leg	10
5254 Hip, flail joint	80
5255 Femur, impairment of:	
Fracture of shaft or anatomical neck of:	
With nonunion, with loose motion (spiral or oblique fracture)	80
With nonunion, without loose motion, weightbearing preserved with aid of brace	60
Fracture of surgical neck of, with false joint	60
Malunion of:	
With marked knee or hip disability	30
With moderate knee or hip disability	20
With slight knee or hip disability	10

³Entitled to special monthly compensation.

THE KNEE AND LEG

	Rat- ing
5256 Knee, ankylosis of:	
Extremely unfavorable, in flexion at an angle of 45° or more	60
In flexion between 20° and 45°	50
In flexion between 10° and 20°	40
Favorable angle in full extension, or in slight flexion between 0° and 10°	30
5257 Knee, other impairment of:	
Recurrent subluxation or lateral instability:	
Severe	30
Moderate	20
Slight	10
5258 Cartilage, semilunar, dislocated, with frequent episodes of "locking," pain, and effusion into the joint	20
5259 Cartilage, semilunar, removal of, symptomatic	10
5260 Leg, limitation of flexion of:	
Flexion limited to 15°	30
Flexion limited to 30°	20
Flexion limited to 45°	10
Flexion limited to 60°	0
5261 Leg, limitation of extension of:	
Extension limited to 45°	50
Extension limited to 30°	40
Extension limited to 20°	30
Extension limited to 15°	20
Extension limited to 10°	10
Extension limited to 5°	0
5262 Tibia and fibula, impairment of:	
Nonunion of, with loose motion, requiring brace	40
Malunion of:	
With marked knee or ankle disability	30

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THE KNEE AND LEG—Continued

	Rat- ing
With moderate knee or ankle disability	20
With slight knee or ankle disability	10
5263 Genu recurvatum (acquired, traumatic, with weakness and insecurity in weight-bearing objectively demonstrated)	10

THE ANKLE

	Rat- ing
5270 Ankle, ankylosis of:	
In plantar flexion at more than 40°, or in dorsiflexion at more than 10° or with abduction, adduction, inversion or eversion deformity	40
In plantar flexion, between 30° and 40°, or in dorsiflexion, between 0° and 10°	30
In plantar flexion, less than 30°	20
5271 Ankle, limited motion of:	
Marked	20
Moderate	10
5272 Subastragalar or tarsal joint, ankylosis of:	
In poor weight-bearing position	20
In good weight-bearing position	10
5273 Os calcis or astragalus, malunion of:	
Marked deformity	20
Moderate deformity	10
5274 Astragalectomy	20

SHORTENING OF THE LOWER EXTREMITY

	Rat- ing
5275 Bones, of the lower extremity, shortening of:	
Over 4 inches (10.2 cms.)	³ 60
3½ to 4 inches (8.9 cms. to 10.2 cms.)	³ 50
3 to 3½ inches (7.6 cms. to 8.9 cms.)	40
2½ to 3 inches (6.4 cms. to 7.6 cms.)	30
2 to 2½ inches (5.1 cms. to 6.4 cms.)	20
1¼ to 2 inches (3.2 cms. to 5.1 cms.)	10
NOTE: Measure both lower extremities from anterior superior spine of the ilium to the internal malleolus of the tibia. Not to be combined with other ratings for fracture or faulty union in the same extremity.	

³ Also entitled to special monthly compensation.

THE FOOT

	Rat- ing
5276 Flatfoot, acquired:	
Pronounced; marked pronation, extreme tenderness of plantar surfaces of the feet, marked inward displacement and severe spasm of the tendo achillis on manipulation, not improved by orthopedic shoes or appliances.	
Bilateral	50
Unilateral	30
Severe; objective evidence of marked deformity (pronation, abduction, etc.), pain on manipulation and use accentuated, indication of swelling on use, characteristic callosities:	
Bilateral	30
Unilateral	20

THE FOOT—Continued

	Rat- ing
Moderate; weight-bearing line over or medial to great toe, inward bowing of the tendo achillis, pain on manipulation and use of the feet, bilateral or unilateral	10
Mild; symptoms relieved by built-up shoe or arch support	0
5277 Weak foot, bilateral:	
A symptomatic condition secondary to many constitutional conditions, characterized by atrophy of the musculature, disturbed circulation, and weakness:	
Rate the underlying condition, minimum rating	10
5278 Claw foot (pes cavus), acquired:	
Marked contraction of plantar fascia with dropped forefoot, all toes hammer toes, very painful callosities, marked varus deformity:	
Bilateral	50
Unilateral	30
All toes tending to dorsiflexion, limitation of dorsiflexion at ankle to right angle, shortened plantar fascia, and marked tenderness under metatarsal heads:	
Bilateral	30
Unilateral	20
Great toe dorsiflexed, some limitation of dorsiflexion at ankle, definite tenderness under metatarsal heads:	
Bilateral	10
Unilateral	10
Slight	0
5279 Metatarsalgia, anterior (Morton's disease), unilateral, or bilateral	10
5280 Hallux valgus, unilateral:	
Operated with resection of metatarsal head	10
Severe, if equivalent to amputation of great toe ..	10
5281 Hallux rigidus, unilateral, severe:	
Rate as hallux valgus, severe.	
Note: Not to be combined with claw foot ratings.	
5282 Hammer toe:	
All toes, unilateral without claw foot	10
Single toes	0
5283 Tarsal, or metatarsal bones, malunion of, or nonunion of:	
Severe	30
Moderately severe	20
Moderate	10
NOTE: With actual loss of use of the foot, rate 40 percent.	
5284 Foot injuries, other:	
Severe	30
Moderately severe	20
Moderate	10
NOTE: With actual loss of use of the foot, rate 40 percent.	

THE SPINE

	Rat- ing
5285 Vertebra, fracture of, residuals:	
With cord involvement, bedridden, or requiring long leg braces	100
Consider special monthly compensation; with lesser involvements rate for limited motion, nerve paralysis.	
Without cord involvement; abnormal mobility requiring neck brace (jury mast)	60

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THE SPINE—Continued

	Rat- ing
In other cases rate in accordance with definite limited motion or muscle spasm, adding 10 percent for demonstrable deformity of vertebral body. NOTE: Both under ankylosis and limited motion, ratings should not be assigned for more than one segment by reason of involvement of only the first or last vertebrae of an adjacent segment.	
5286 Spine, complete bony fixation (ankylosis) of: Unfavorable angle, with marked deformity and involvement of major joints (Marie-Strumpell type) or without other joint involvement (Bechterew type)	100
Favorable angle	60
5287 Spine, ankylosis of, cervical: Unfavorable	40
Favorable	30
5288 Spine, ankylosis of, dorsal: Unfavorable	30
Favorable	20
5289 Spine, ankylosis of, lumbar: Unfavorable	50
Favorable	40
5290 Spine, limitation of motion of, cervical: Severe	30
Moderate	20
Slight	10
5291 Spine, limitation of motion of, dorsal: Severe	10
Moderate	10
Slight	0
5292 Spine, limitation of motion of, lumbar: Severe	40
Moderate	20
Slight	10
5293 Intervertebral disc syndrome: Pronounced; with persistent symptoms compatible with sciatic neuropathy with characteristic pain and demonstrable muscle spasm, absent ankle jerk, or other neurological findings appropriate to site of diseased disc, little intermittent relief	60
Severe; recurring attacks, with intermittent relief	40
Moderate; recurring attacks	20
Mild	10
Postoperative, cured	0
5294 Sacro-iliac injury and weakness:	
5295 Lumbosacral strain: Severe; with listing of whole spine to opposite side, positive Goldthwaite's sign, marked limitation of forward bending in standing position, loss of lateral motion with osteo-arthritic changes, or narrowing or irregularity of joint space, or some of the above with abnormal mobility on forced motion	40
With muscle spasm on extreme forward bending, loss of lateral spine motion, unilateral, in standing position	20
With characteristic pain on motion	10
With slight subjective symptoms only	0

THE SKULL

	Rat- ing
5296 Skull, loss of part of, both inner and outer tables:	

THE SKULL—Continued

	Rat- ing
With brain hernia	80
Without brain hernia: Area larger than size of a 50-cent piece or 1.140 in ² (7.355 cm ²)	50
Area intermediate	30
Area smaller than the size of a 25-cent piece or 0.716 in ² (4.619 cm ²)	10
NOTE: Rate separately for intracranial complications.	

THE RIBS

	Rat- ing
5297 Ribs, removal of: More than six	50
Five or six	40
Three or four	30
Two	20
One or resection of two or more ribs without regeneration	10
NOTE (1): The rating for rib resection or removal is not to be applied with ratings for purulent pleurisy, lobectomy, pneumonectomy or injuries of pleural cavity.	
NOTE (2): However, rib resection will be considered as rib removal in thoracoplasty performed for collapse therapy or to accomplish obliteration of space and will be combined with the rating for lung collapse, or with the rating for lobectomy, pneumonectomy or the graduated ratings for pulmonary tuberculosis.	

THE COCCYX

	Rat- ing
5298 Coccyx, removal of: Partial or complete, with painful residuals	10
Without painful residuals	0

[29 FR 6718, May 22, 1964, as amended at 34 FR 5062, Mar. 11, 1969; 40 FR 42536, Sept. 15, 1975; 41 FR 11294, Mar. 18, 1976; 43 FR 45350, Oct. 2, 1978; 51 FR 6411, Feb. 24, 1986; 61 FR 20439, May 7, 1996]

§ 4.72 [Reserved]

§ 4.73 Schedule of ratings—muscle injuries.

NOTE: When evaluating any claim involving muscle injuries resulting in loss of use of any extremity or loss of use of both buttocks (diagnostic code 5317, Muscle Group XVII), refer to § 3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation.